

POSITION	ID NO.	DATE
CLASSIFIER	22	9/30/94
EXAMINER	915	10-19
TYPIST	324	1795
VERIFIER	315	1-1795
CORPS CORR.		
SPEC. HAND	455	1-9-95
FILE MAINT.	4931	10/31/94
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	5/29/94
2	11/16/94
3	11/26/94
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SYMBOLS

/	Rejected
-	Allowed
+	Cancelled
(Through number)	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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